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PTO/SB/30 (09-04)
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Request	Application Number	09/936,688-Conf. #9251 December 28, 2001 Thierry Brusseaux		
For Continued Examination (RCE)	Filing Date			
Transmittal	First Named Inventor			
Address to: MS RCE	Art Unit	3629		
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Examiner Name	D. W. Ruhl		
7.00.00.00.00.00.00.00.00.00.00.00.00.00	Attorney Docket Number	09667/002001		

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. 1. Submission required under 37 CFR 1.114 | Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If

applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).							
a. X Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.							
i. Cor	i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on						
ii. 🗴 Oth	ii. X Other Response to Final Office Action dated October 28, 2004 filed on December 22, 2004						
b. Enclose	b. Enclosed						
iAm	endment/Reply iii. Information I	Disclosu	re Stateme	nt (IDS)			
ii. Affidavit(s)/Declaration(s) iv. Other							
2. Miscellaneous] .						
a. Suspen	sion of action on the above-identified application is requ	ested un	der 37 CF	R 1.103(c) for a			
period o	of months. (Period of suspension shall not exc	ceed 3 mo	nths; Fee ur	nder 37 CFR 1.17(i) required)			
b. Other							
3. Fees The RC	E fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 w	hen the f	RCE is filed				
a. The Dire	ector is hereby authorized to charge the following fees, o	or credit	any overpa	syments, to			
Deposit	Deposit Account No I have enclosed a duplicate copy of this sheet.						
i. X RCE fee required under 37 CFR 1.17(e)							
ii. Extension of time fee (37 CFR 1.136 and 1.17)							
iii. Other							
b. Check in the amount of \$ enclosed							
c. X Payment by credit card (Form PTO-2038 enclosed)							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED							
Signature	KLITYLU	Date	January	28, 2005			
Name (Print/Type)	Robert P. Lord	Registra	tion No.	46,479			

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV562274958US
in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown
below.

Dated: January 28, 2005

(Yuki Tsukuda)

PTO/SB/17 (12-04v2)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL FOR FY 2005 Application Number Figure 2005 Application Number First Named Inventor Thierry Brusseaux Examiner Name D. W. Ruhl Activity 3629 Art Unit Art Unit Osha & May L.L.P. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge feets) indicated below X Charge any additional feets) or underpayment of First Named Inventor Thierry Brusseaux Examiner Name D. W. Ruhl Charge feets indicated Selow X Charge any additional feets) or underpayment of First Named Inventor Thierry Brusseaux Examiner Name D. W. Ruhl Charge feets indicated Selow X Charge any additional feets or underpayment of For Examiner Name D. W. Ruhl Charge feets indicated Selow X Charge any additional feets or underpayment of First Named Inventor Thierry Brusseaux Examiner Name D. W. Ruhl Charge feets indicated Selow X Charge any additional feets or underpayment of The Charge feets indicated Selow X Charge any additional feets or Inventor Thierry Brusseaux Examiner Name D. W. Ruhl D. W. Ruhl Thierry Brusseaux Examiner Name D. W. Ruhl The Select Name of Select Name The Select Name of Select Name of Select Name The Select Name of Select Name The Select Name of Select Name The S	7		i gay nn 12/08/2004	Complete if Kno						
For FY 2005 Applicant claims small entity status. See 37 CFR 1:27 TOTAL AMOUNT OF PAYMENT (\$) 790.00 Attorney Docket No. 09667/002001 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Oth	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Num	ber (09/936,688-Conf. #9251				
For FY 2005 Applicant claims small entity status. See 37 CFR 1:27 TOTAL AMOUNT OF PAYMENT (\$) 790.00 Attorney Docket No. 09667/002001 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Oth		I FEE TRANSMITTAL [Filing Date December 2		December 28,	3, 2001			
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TOTAL AMOUNT OF PAYMENT (\$) 790.00 Attorney Docket No. 09667/002001	ł	For FY 2005			Examiner Name	I	D. W. Ruhl			
METHOD OF PAYMENT (check all that apply) Check	ļ	Applicant claims small er	ntity status.	See 37 CFR 1.27	,	Art Unit		3629		
Check X Credit Card Money Order None Other (please identify):	L	TOTAL AMOUNT OF PAYM	ENT	(\$) 790.00		Attomey Docket	No.	09667/002001		
Deposit Account Deposit Account Number 50-0591 Deposit Account Name Osha & May L.L.P.		METHOD OF PAYMENT	(check all t	hat apply)						0
For the above-identified deposi account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayment of fee(s) indicated below, except for the filing fee X Credit any overpayments FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Fee (\$)		Check X Credit Care	d N	foney Order	Nor	ne Other (1	olease identi	ify):		· · · · · · · · · · · · · · · · · · ·
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X Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments X Cr	İ				rector is	<u> </u>	•			
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(Attomey/Agent) 40,479 Telephone (713) 220-8600	E	SUBMITTED BY	A Y	(/		D				
Name (Print/Type) Robert P. Lord Date January 28, 2005	S	Signature	XX	<u></u>			46,479	Telephone	(713) 22	8-8600
	Ŀ	Name (Print/Type) Robert P. Lo	ord					Date	January 2	28, 2005

I hereby certify that this correspondence is in an envelope addressed to: MS RCE, C below.	s being deposited with the U.S ommissioner for Patents, P.O.	. Postal Service as Expres Box 1450, Alexandria, V	ss Mail, Airbill No. EV562274958US, A 22313-1450, on the date shown
Dated: January 28, 2005	Signature:	Bulan	_ (Yuki Tsukuda)

Signature: _